<u> </u>		
SENDER: COMPLETE THIS SECTION	COMPLETE	HIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also compitem 4 if Restricted Delivery is desired. Print your name and address on the reso that we can return the card to you. Attach this card to the back of the mail or on the front if space permits. 	verse X B. Received to	Agent Addressee Oy (Printed Name) C. Date of Delivery 2 - 1 9 - 6 8
Article Addressed to:	11	address different from item 1?
WAYNE INDUSTRIES, A division of EBSCO c/o Any Officer or Agent 1400 – 8 th Street, North		
O8cv94 S4C	3. Service Typ Certified Register Insured	Mali
00 17 340	4. Restricted	Delivery? (Extra Fee)
Article Number (Transfer from service label)	7004 2510 000	2 6128 4578
PS Form 3811, February 2004	Domestic Return Receipt	102595-02-M-1540